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Battling PTSD and Sexual Assault in the Combat Zone

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Post-traumatic Stress Disorder (PTSD) is a term that everyone in the military community has become very familiar with. The association between combat stress and a heightened risk of developing PTSD is well known. In fact, PTSD has come to be known as one of the signature wounds of the conflicts in Iraq and Afghanistan where the lines between combatants and civilians are blurred and the combat zone can be anywhere from a crowded marketplace to a desolate road riddled with Improvised Explosive Devices.

But combat exposure is not the only risk factor for PTSD. It's a complex mental health condition that can arise when an individual experiences a traumatic or catastrophic event — like sexual assault. And, when a sexual assault happens to a military member serving in a combat zone, the psychological trauma of the assault can be exacerbated by combat stress. Cumulative traumas can result in higher incidences of PTSD.


As we take time during the month of April to raise awareness about sexual assault in the military and continue focusing our efforts on prevention, it's also important to understand how incidents of sexual assault that occur in a combat zone can have a devastating impact on the psychological health of our Sailors and Marines and degrade mission readiness.


Unit cohesion and camaraderie among service members are hallmarks of military service that not only make a unit more effective in combat, but also play a positive role in building resilience and alleviating combat stress in its individual members. When individuals develop close-knit bonds with other members of their unit through a shared sense of identity and


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purpose, they create a support system that can have a positive impact on resilience and psychological health.

The experiences that I had while serving in Afghanistan last year with Mobile Care Team (MCT) 7, a small unit that provided surveillance, preventative mental health care, and command consultations to Individual Augmentees (IAs), highlighted the importance of unit cohesion and camaraderie in a combat zone. IAs, by definition, are service members deployed individually and some are without access to local Navy leadership. Lack of unit support while serving in this type of environment can create psychological stress. One Sailor that I met had witnessed an accidental shooting and was also experiencing family stressors. He was able to create his own support network by finding another Sailor at his location to talk to, which helped him to manage his stress. Even though it was just one other person, this Sailor was able to make a personal connection with another service member that buoyed his resiliency.

Ironically, the very qualities of military culture that can alleviate combat stress may also be factors that compound the effects of psychological injury caused by sexual assault. Service members, particularly those serving together in a combat zone, rely on each other not just for their physical safety, but also for the emotional support that comes from camaraderie and unit cohesion. When that relationship is betrayed through sexual assault by another service member, the victim’s level of psychological distress may be elevated. Additionally, trust in their fellow service members may be destroyed and the victim may become isolated from what was once their support network, creating even more distress. Ultimately, all of these factors combined with combat stress may contribute to a variety of mental health problems, including PTSD.

Even if the victim of sexual assault thinks they can manage their emotional trauma on their own and not let it affect them, for most people, there will come a time when that trauma comes to head, particularly if it’s associated with combat stress. Untreated, the psychological injury experienced by victims of sexual assault can manifest as substance or alcohol abuse, depression, anxiety disorders, or PTSD. These mental health problems, as with any physical injury or illness, can put a mission in jeopardy by having a member of the unit whose focus is on their internal turmoil and not the mission.

During my time in Afghanistan, I became aware of a female Sailor who had been the victim of sexual assault. She didn’t report it, but it was clear to other members in her unit what had happened. In addition to the psychological toll the assault took on this young Sailor, it was also having an impact on her shipmates who knew what was happening and didn’t know how to help her, disrupting the unit. Fortunately, they approached me when MCT-7 was onsite at their location and I was able to ensure the Sailor who had been assaulted received the support she needed.

When a Sailor or Marine has a physical injury or illness, they seek medical attention. Seeking mental health care for psychological injuries and illnesses is no different. For service members experiencing symptoms of psychological injury or who have been sexually assaulted, getting professional help is the best course of action. When deciding whether or not to seek mental health care, here are a few things to consider:

- Victims of sexual assault, male and female, are more likely to develop mental health issues than other service members.
- PTSD is treatable. Every individual is different and working with a mental health provider will help tailor treatment to fit the individual’s psychosocial and medical history. Receiving treatment from a qualified professional can significantly increase the likelihood of a lasting recovery.

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- Restricted reporting allows victims of sexual assault to seek medical and mental health care without initiating an investigation and involving their command or law enforcement. Restricted reports may be made only to a Sexual Assault Prevention Response coordinator, victim advocate or health care personnel. The victim may change the report to Unrestricted at a later date.

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As we continue our efforts to end sexual assault in our Navy by focusing on awareness and prevention measures, it's also important to remember to care for each victim's psychological injuries in the aftermath. As health care providers, as leaders, and as shipmates, we can do this by encouraging sexual assault victims to seek the support of a mental health care provider as soon as possible after the assault. This is especially important if they are also experiencing combat or operational stress, which can amplify the magnitude of psychological harm. The sooner we can provide care to victims of assault, the sooner we can help them get better.

Throughout the Navy, on ships and on shore, in uniform and in civilian attire, we have many dedicated and well-qualified mental health providers standing by ready to assist Sailors and Marines who are struggling with psychological injuries and illnesses and help them on their road to recovery.

For more information and various resources for SAAM, visit www.sapr.navy.mil. If you need help regarding a sexual assault, visit www.safehelpine.org or call the helpline at 877-995-5247.

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